

# Sign Language Interpreter Desk Aid & Checklist

The Job Centers' procedure for obtaining a licensed American Sign Language (ASL) interpreter or other sign language interpreting for any customer who needs or requests an interpreter is outlined below. If you have any questions, please contact your Local EO Officer or the State EO Officer:

Danielle Smith, (573)751-2428 or [danielle.smith@dhewd.mo.gov](mailto:danielle.smith@dhewd.mo.gov).

1. Record the customer's name, contact information and required meeting time & date or availability for meeting during the next 3 days. See Checklist form (p.3)
2. If the customer can wait for you to contact the interpreter agency and schedule the appointment, go to step 4 or contact your Local EO Officer or Danielle Smith for assistance by phone at (573) 751-2428.
3. If not, make certain that you have the customer's contact information to schedule the appointment after you identify an interpreter who is available.
4. Go to: <http://archive.oa.mo.gov/purch/contracts/>
  - Scroll down to 4. Search by Contract Type, Select the radio button for "Statewide Professional Service Contracts," Select "Communication and Support Services" and click Submit.
  - "Contract number" hyperlink to the right of the title (any hyperlink will go to the contract).
  - Select PDF or Word Format.
  - Find your county on the alphabetical list of counties where the interpreter is needed (pages 6-28). You will not need the Advanced or Master levels unless you have a specialized project that requires this (see 2.4.1 page 77-78).

*Note:* The interpreter agency may send an Advanced or Master Level interpreter, but your contracted rate is based on the level of interpreter you request— "Basic Level (3)."

- Identify the low-cost, Basic Level (8-5 p.m.) hourly rate, Vendor for your county (p.6-28).
  - Match the vendor to the list of vendors and their contact info on pages 1-3.
5. Call and inform this interpreter agency (vendor) that you are using the State Contract to obtain services. Request a "Basic Level 3 - Interpreter" to be provided on a given date and time that has been jointly arranged with the customer and staff.

Confirm the contracted hourly rate and that there are no additional charges. (The contracted hourly rates listed are a flat hourly rate. No additional charges for travel, travel time or mileage are allowed unless services are provided outside of awarded counties as listed on pages 6-28. (2.7.6.a page 80).

The contractor/interpreter will be paid for a minimum of two (2) hours even if their services are required for less than 2 hours or if the state agency cancels with less than 24-hour notice. It is important to let the customer know when the interpreter has been confirmed and exactly what timeframe to expect. (2.7.3.c. on page 79)

When the interpreter arrives, ask to see their Missouri State Sign Language Interpreter's license in order to make a copy for your records. The copy can be kept in order to document the interpreter's credentials. (2.3.4.a.



For additional information about Missouri Office of Workforce Development services, contact a Missouri Job Center near you. Locations and additional information are available at [jobs.mo.gov](http://jobs.mo.gov) or 1-888-728-JOBS (5627). The Missouri Department of Higher Education and Workforce Development is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Missouri Relay Services at 711.



on page 77)

Track the amount of time that the interpreter is there (2.7.3.a. on page 79) and ask to make a copy of the interpreter's license to keep on file. This is proof that a Missouri licensed interpreter was used. You can also search <https://renew.pr.mo.gov/licensee-search.asp> to check the list of Missouri licensed sign language interpreters.

Remember that you are communicating with your customer, not the interpreter. Look at your customer, rather than the interpreter. Be certain to address your customer directly when you speak, for example, don't say "tell him" or "tell her." Speak directly to your customer in your usual manner; there is no need to speak slowly or loudly. Make the most of your time and use facial expression and body language to help convey your message. You will need to provide a clear line of vision for your customer, the interpreter and yourself. A conference table or office with adequate space may work best.



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# Sign Language Interpreter Checklist

**(Confidential)**

(Complete the following to ensure that effective services are provided to anyone requesting a sign language interpreter.)

Customer Name: \_\_\_\_\_

Customer's Contact Information (email/phone/text): \_\_\_\_\_

Day(s) & Timeframe(s) customer is available for appointment: \_\_\_\_\_

*(Example: Tuesday, March 11 at 8am - 4pm; Wed & Thursday 10-2pm)*

Contact Interpreter Agency Low cost Agency's Name: \_\_\_\_\_

*(Instructions are on pages 1 - 2 of the Desk Aid)*

Phone #: \_\_\_\_\_

Agency's office contact person: \_\_\_\_\_

Interpreter's Name & Cell phone #: \_\_\_\_\_

Confirm the state contract's cost per hour (x2-hour min): \$

Request a written confirmation of appointment date/time & location using state contract

Email the Job Center's address, phone #, directions & contact staff person to the Interpreter and get contact info and telephone # for the interpreter.

Date and Timeframe of appointment (Interpreter confirmed): \_\_\_\_\_

Date and Timeframe Confirmed with Customer by:      Email      Phone      In Person

## Office Use

Date: \_\_\_\_\_ Staff Name: \_\_\_\_\_

Notified your Local EO Officer or Designee by:      Email      Phone      In-person

Planned Meeting's Attendees and Staff:

Planned Services: \_\_\_\_\_

Welcome      Skills      Jobs Search      Workshop      Resume/Other: \_\_\_\_\_

*(Forward this form to the Local EO Officer or OWD Supervisor)*

Day of Meeting: \_\_\_\_\_

Interpreter's Name: \_\_\_\_\_

Time Started / Completed: \_\_\_\_\_

Copy of Interpreter License:      Y      N

Applicant ID/Future Appointment date: \_\_\_\_\_

*\*\*Form should be maintained according to OWD Confidentiality Policy 01-2008, Change 2. Keep this form in a locked cabinet, separate from the job seeker file.*



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